

MINERAL MINING PROGRAM

900 NATURAL RESOURCES DRIVE, SUITE 400 CHARLOTTESVILLE, VA 22903 (434) 996-5910

Permit Number:	
Bond:	

SURETY BOND RIDER

	Increase	ÿ	Decrease ÿ			New 1	Boı	nd An	nount	:				
	TO be att	ached to	and form a pa	rt of S	urety (Compan	у Е	Bond N	lo .					
writte	n by									_ as	SUI	RETY	, on be	half
of _														
form			EALTH of VI											
							JK,	DIVI	SION	OF N	/111	LIKAI	7 1 411 141	ш ч
	WHERE	AS, the (DBLIGEE issu	ed to tl	he PR	INCIPA	L I	Permit	Numb	er			d	ated
on		,	pursuant to the	applica	ation o	f the PR	RIN	CIPA	L,					
		under th	bond and rider e above-mention			•							•	
	NOW,	therefore	, the amour	nt of	the	bond	is		increa	ised		dec	reased	by
					(\$) Do	llars	to a t	otal sui	n of
					(\$_) Do	ollar	s, to	cover	the
additi	onal/reduced	l cost of	reclaiming all a	ffected	lands.									
	J		ll other terms									chang	ed.	
SIGN	ED AND S	EALED	THIS	DAY	OF_				_, 20		<u>_</u> .			

BY COMPANY/PRINCIPAL:	
	(SEAL) By:Company/Principal Official
Company /Principal	Company/Principal Official
 Title	
	pefore me by
	, 20, in the City/County of
··	
	(SEAL)
	Notary Public
My Commission expires	20
wy commission expires	, 20
. BY SURETY: Attach copy bearing s	seal of Power of Attorney or documentation supporting
Corporate Officer's a	authority to issue surety bond.
	(SEAL) By: Attorney-in-Fact
Surety Name	Attorney-in-Fact
Date	Typed name
My Power of Attorney is recorde	ed in the Clerk's Office of the Circuit Court of
•	in Deed Book, Page,
or Instrument, and	d has not been revoked.
	Attorney-in-Fact
	Attorney-in-Fact
	Attorney-in-Fact
	Attorney-in-Fact

COMMONWEALTH OF VIRGINIA
(or, alternatively, Commonwealth or State of) CITY/COUNTY OF
, to wit:
I, the undersigned notary public, do certify that personally appeared
before me in the jurisdiction aforesaid and made oath that he/she is the attorney-in-fact of
, the Surety, that he/she is duly
authorized to execute on its behalf the foregoing Bond pursuant to the Power of Attorney noted above,
and on behalf of said Surety, acknowledged the aforesaid Bond(s) as its act and deed.
Given under my hand this day of, 20
(SEAL)
Notary Public
My Commission expires:
III. BY ISSUING AGENT: 1. Attach copy of Agency License and Assignment Card from
Bureau of Insurance.
2. Attach verification of individual's authority to sign on behalf of Agency
Agency Issuing Surety Bond (provide the following information):
A gency name
Agency name:Authorized agent:
Agent address:
Office telephone number:
IV. DIVISION APPROVAL:
ACCEPTED:
ACCEPTED: Date Date